SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

 By the lodgement of this report to the insurers, you hereby con aforesaid. 	sent to the archiving of this report at the centre and to copies of the report being made available	
	ACCIDENT STATEMENT	
Date Of Report	21/02/2020 13:12	
Date Of Accident	21/02/2020 08:05	
Exact Location Of Accident	THOMSON RD AT JUNCTION OF TOA PAYOH RISE	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SLL7336E	
Insured/Policyholder		
Name Of Registered Owner	WEE AIK TAT	
NRIC No	SXXXX813B	
Email Address	WATT@SINGTEL.COM	
Mobile Phone No	(LOCAL) +65-98184288	
Alternative Phone No	OTHERS-98184288	
Vehicle Particulars		
Manufacturer	NISSAN	
Model	X-TRAIL-2.0 CVT (A)	
Exact Purpose for which vehicle was being used at time of accident	t .	
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
If No, Please state action to be taken	THIRD PARTY	
Vehicle Category	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	2100503282-02	
Cover Note Number	08/03/2019 - 07/03/2020	
Driver		
Name of Driver	WEE AIK TAT	
NRIC No	SXXXX813B	
Date Of Birth	20/01/1962	

Date Of Birth **INDOOR** Occupation Date Of Driving Pass 23/11/1982

Driving Experience 37 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98184288

Fax Number

Contact Number OTHERS-98184288 **EMail Address** WATT@SINGTEL.COM Address 131 THOMSON RIDGE

Postcode S574713

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident CHAIN COLLISION

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

Refer to attached sketch plan.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBE4264D

Vehicle Make/Model/Colour NISSAN NV200

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE
Name of Driver LO PUI HUI JANSEN

NRIC/Passport Number SXXXX139G Contact Number 81219530

Address

Postcode

Insurance Company Name LONPAC INSURANCE BHD

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJF199K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TOYOTA VIOS BLACK

PRIVATE CAR

SIOW SERK LIEN SHARON (XIAO XUELING SHARON)

SXXXX895H

96708502

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT			
The traffic lights at the junction of Thomson Road and Too Paych Rise has just			
twill green and cars started to move of. Clear and dry conditions. Heavy traffic.			
The reliade in front of nine (a black Toyota Vios, SJF 199K) moved off on the			
extreme right are and I followed behind at a safe distance.			
Shortly after crossing the road junction, SJF 199K, suddenly jam the brakes			
and stopped suddenly.			
I also stepped on my Grahes and was able to stop in time as my speed			
was low, having just moved of from the traffic light that just turned areas.			
The vehicle bohind, a NISAN NV 200 van (GBE 42640) crashed into my			
rear. This caused my car to surge forward and banged into the car			
infront. My car was sundwiched between both cours.			
Damage to car infront was visible to its trum rear bumpor			
Danuage to my car was light scrutches to the front. Dangage to my rear			
was scratched /dent to the rear tailgate door and to the bunger.			
Damage to rear vehicle was Misible to its front bumpler.			
Photos are available.			
Road conditions: Heavy traffic. Dry and cl	cev. Video of scene available		
important.	- Reporting Only		
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14)	- Claim OD		
DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame	- Claim TP		
from the day of the occurrence.	- Claim OD/ TP at other workshop		
	ordini obj ii de otilei workshop		

DECLARATION

 $\ensuremath{\mathsf{I/WE}}$ declare the foregoing particulars are true in every respect.

Policyholder's signature Date & Time

21 Feb 2020.

21 Feb 2020 11:55am Driver's Signature (if driver not the policyholder) Date & Time Mas Stra

Reporting Centre Personnel's Signature Name:

Nric/Fin No.

Sketch Plan Pg. 2

SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time

0

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

GIARMIC SketchPlanForm_V3



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Wee Aik Tat

Vehicle No. : SLL7336E : 08 Mar 2019 To 07 Mar 2020 Policy No. Period of Insurance : 2100503262-02 Endorsement No.

Engine No. : MR20969030B

Chassis No. : JN1JANT32Z0003020 : 07 Feb 2019 Issued Date

ABOUT THE COVER

Make/Model - NISSAN X-TRAIL

Engine Capacity/Tormage: 1,997,00 CC Sum Insured : Market Value First Year of Registration : 2017 Driver Restriction : NA Off Peak Car | No. Insuring with COE/PARF Yes

Person or Classes of Persons Entitled to Drive":

a) The Policyteride:
b) Any other paraser who is driving on the Policyholder's order or with Numer parasers.
This Policy will indemnify the Policyholder or any surfacilised others only it heaths meets the specified age condition.

Year have to pay as additional sum of \$5 gibb as "Toung anothe trasperienced Driver Except" ("Y.OK") if "You are or "Your Suffer lead (Driver promed or unecessary is under the age of \$2 another less than years' dividing experienced.

Age Condition : All Age Condition

Limitation as to use" :

Use only for sportal demention and places or process and for the Policy to do in business. This Policy does not cover use for this or reveal, deeing tables, onlying bus, eating, pace-making, inhabits, that or speed fairfully, the carriage of goods other than a semples is connected with any track as business or use for my purpose in connected with state Track.

Loss of Use 1/500cc + 1/500cc

* Unifolding standards into pasted by Section 8 of the Motor First data (Tix of-Party Right and Companyaltyrs) Act (Cap. 188) and Section 65 of the Road Transport Act, 1867 (Maleys at less not to be installed under these feedbags.

EXCESS

Section 1 File - 50 Own Demails - 5500 Teah - 50 Flood Cover - 50

Section 2 Property Demage - 50

Wheelerman - 9300

Named Driver and Excess (whos applicable)

Way Ali: Te : - 8550 (Cvir. Currelput)

APPROVED REPORTING CENTRESVAUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1.TO AutoOffice Add Ho.1. Seets Low Yang Road Stingspore emittin 606 to inti-

E.A. decision frequencia. Act: To Unit Resel 4 Sepapore 408620 64808185.

E.D.O. Aucobielo. Act: 25 Long No. Road Singapore 108021 619346. 1 situation 1 situation

For other Approved Reporting Generate IC Authorises Repeters, please contact on Stream accident energiesty testine or wild local accident activities and described and described Wild SGF from (Funes or Scope Plus).

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

tible bently certily deal the policy to which this Costicate of Insurance restate is assert in accordance with the power one of the Matter Verticals (Trad Party Read, and Compensation) Act (Cast Transport Act, 1887 (Matryata) and Baltia is elected (Trad Party Read) Review, 1869 (Matryata)

0500000040400

TAN CHONG ORDER PTC LTC-TKS 911 BURITT MAH ROAD TAM CHONG MOTOR CENTRE SINCAPORE 688822 ANSP-MOTOR

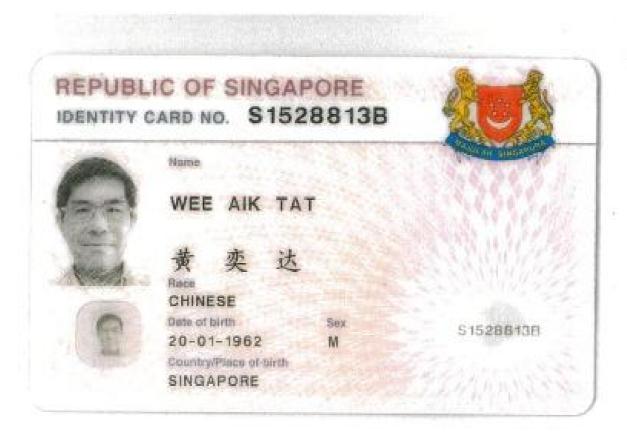
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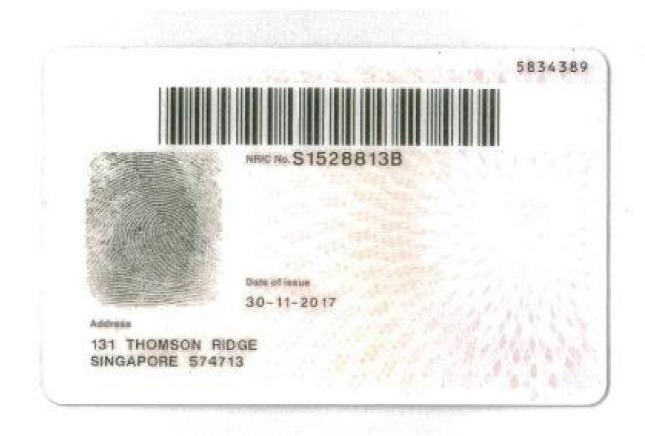
AIG Asia Pacific Insurance Pte. Ltd. AUTI-IORISED REPRESENTATIVE

28 Secritor Way #67-16.4(3 Dutting 5070120) Ti-95-6419 (\$30) wave agreeming

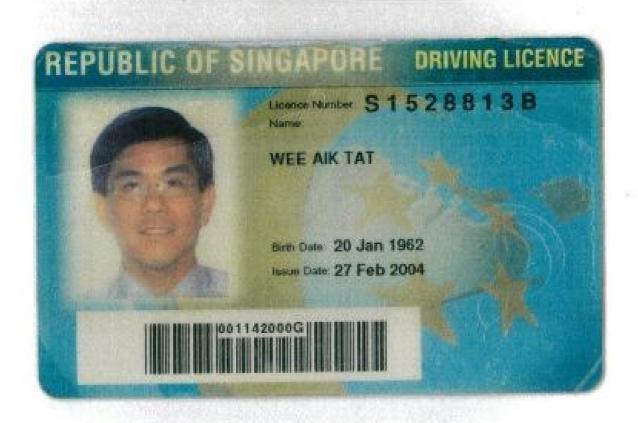
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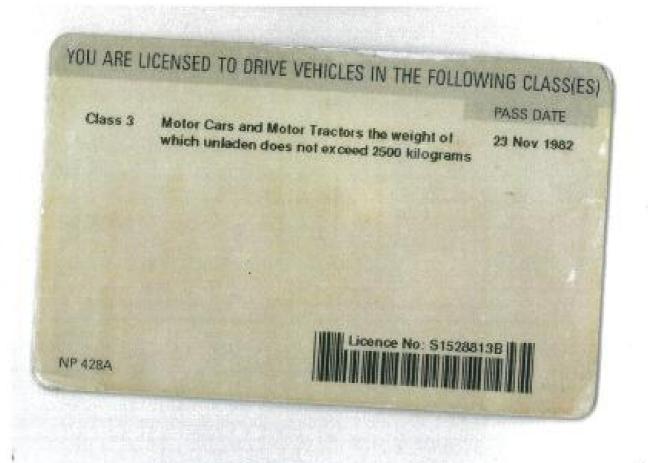
Identification Card





Driving License

















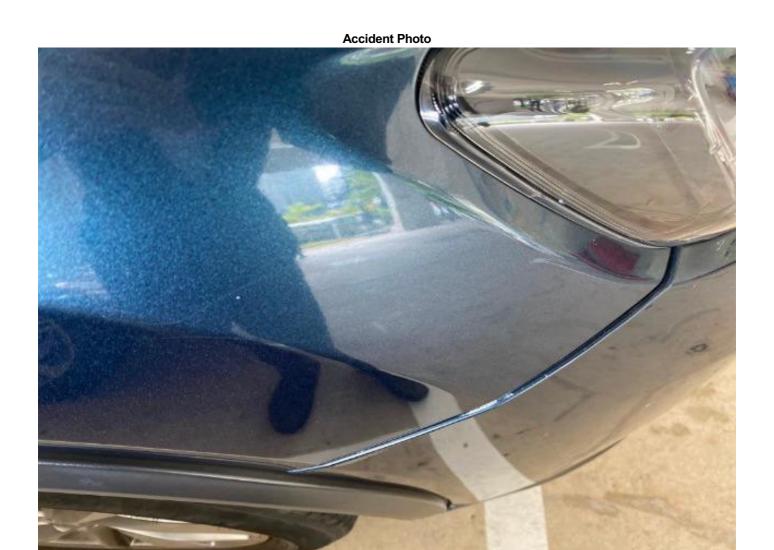


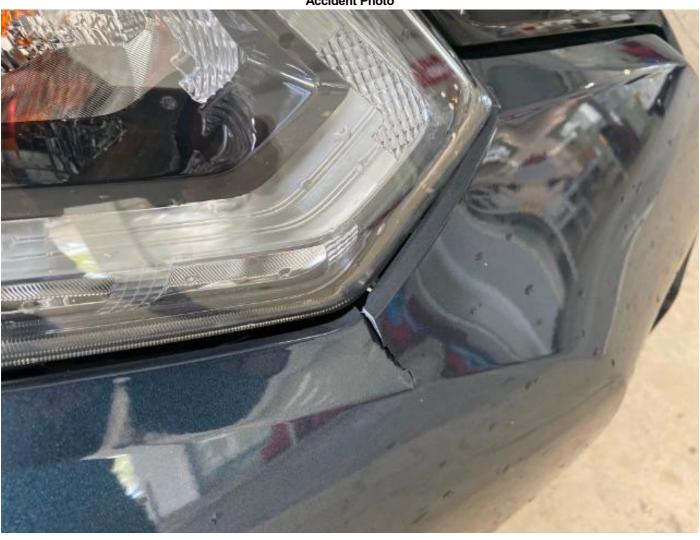












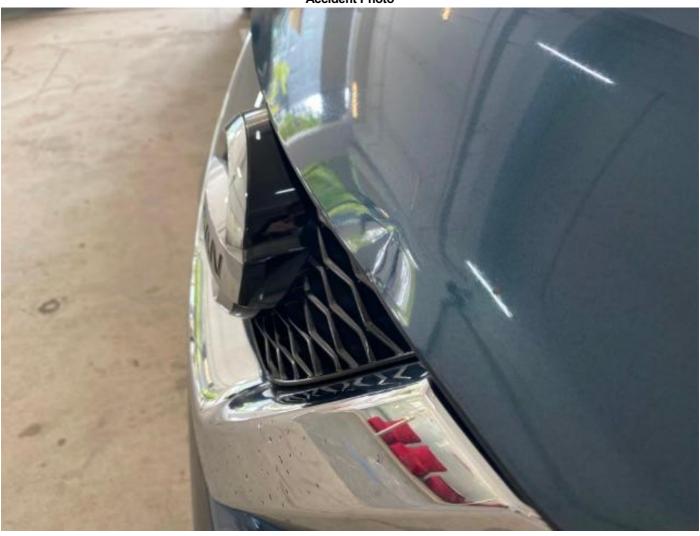










































Driving License



